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| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ■ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|-------------------------|-----------------------|---------------------------------------------------------------------|------------------------------------------|-----------------------------------------------|
| 1. | You | r full name | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| | your pictu exan | government-issued ire identification (for nple, your driver's | Cynthia First name A. | First name |
| | Bring iden | g your picture tification to your meeting- | Middle name Clifton | Middle name |
| 6 11011111111111 | with | the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | ther names you have I in the last 8 years | | |
| | | de your married or en names. | | |
| 3. | your num Indiv | ridual Taxpayer tification number | xxx-xx-1123 | |
| | | | | |

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| De | ebtor 1 Clifton, Cynthia A | A. | Case number (if known) |
|----|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 206 River Dr DeKalb, IL 60115-1922 | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | DeKalb | ~ |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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| De | btor 1 Clifton, Cynthia A | ١. | | | Ca | ase number (if known) |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pai | Tell the Court About | Your Bani | ruptcy Ca | ase | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | □ Cha _l □ Cha _l □ Cha _l | also, go to to oter 7 oter 11 | orief description of each, see A the top of page 1 and check th | lotice Required by 11 U. e appropriate box. | S.C. § 342(b) for Individuals Filing for Bankruptcy (Form |
| 8. | How you will pay the fee | and lift properties of the pro | your attorned action of the printed action o | u may pay. I ypically, if you are ey is submitting your payment of ddress. y the fee in installments. If you installments (Official Form 103 it my fee be waived (You may | e paying the fee yourself, on your behalf, your attor ou choose this option, signal (A). | h the clerk's office in your local court for more details you may pay with cash, cashier's check, or money order. ney may pay with a credit card or check with a gn and attach the <i>Application for Individuals to Pay The</i> if you are filing for Chapter 7. By law, a judge may, but is |
| | | yo | ur tamily si | o, waive your ree, and may do ze and you are unable to pay th Chapter 7 Filing Fee Waived (C | ne fee in installments). If | less than 150% of the official poverty line that applies to you choose this option, you must fill out the <i>Application</i> file it with your petition. |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | |
| | | | District | | _ When | Case number |
| | | | District District | | When | Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ No □ Yes. | | | | |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| | | | Debtor | | - | Relationship to you |
| | | | District | | When | Case number, if known |
| 11. | Do you rent your residence? | ■ No. | Go to li | | | |
| | | ☐ Yes. | | | judgment against you a | nd do you want to stay in your residence? |
| | | | | No. Go to line 12. Yes. Fill out <i>Initial Statement A</i> bankruptcy petition. | About an Eviction Judgm | ent Against You (Form 101A) and file it with this |

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| De | btor 1 Clifton, Cynthia A | ١. | | | Case number (if known) | | |
|------|-----------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | | | | | | |
| Pai | Report About Any Bu | sinesses | You Own | as a Sole Propriet | or | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of bu | siness | | |
| | A sole proprietorship is a | | | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | Number, Street, City, State & ZIP Code | | | | |
| | to this petition. | | Checi | k the appropriate bo | x to describe your business: | | |
| | | | | (| | | |
| | | | | | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | | er (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | operation | s. It you ind | dicate that you are a low statement, and fe | court must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11 | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chap | oter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | |
| | | ☐ Yes. | I am fi | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Part | 4: Report if You Own or I | Have Any | Hazardou | ıs Property or Any | Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or | | What is t | he hazard? | | | |
| | safety? Or do you own any property that needs immediate attention? | | | ate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | Number, Street, City, State & Zip Code | | |
| | | | | | rumber, Street, City, State & Zip Code | | |

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| Deb | tor 1 Clifton, Cynthia | A. | | | Case number (if known) |
|-----|------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Par | 5: Explain Your Effort | s to Re | eceive a Briefing About Credit Counseling | | |
| 15. | Tell the court whether you have received a briefing about credit counseling. | | out Debtor 1: u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a | | out Debtor 2 (Spouse Only in a Joint Case): our must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of |
| | The law requires that you receive a briefing about credit counseling before yo file for bankruptcy. You | u | certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | | completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| | must truthfully check one of the following choices. If yo cannot do so, you are not eligible to file. | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors | | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| | can begin collection activities again. | | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| | | | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this | | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| | | | case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. | | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| | | | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of: | | I am not required to receive a briefing about credit counseling because of: |
| | | | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | | | ☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | | Active duty. I am currently on active military duty in a military combat zone. | | Active duty. I am currently on active military duty in a military combat zone. |
| | | | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. | | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. |

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| Deb | otor 1 Clifton, Cynthia A | ۹. | | | Case r | number (if known) | | |
|------|--------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------|--|
| Par | t 6: Answer These Quest | ions for R | eporting Purpo | oses | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your del | bts primarily consu marily for a personal, | mer debts? Consumer debts are family, or household purpose." | e defined in 11 U.S.C.§ 101(8) as | "incurred by an | |
| | | | ☐ No. Go to | line 16b. | | | | |
| | | | Yes. Go to | o line 17. | | | | |
| | | 16b. | Are your deb | ots primarily busine s or investment or thr | ess debts? Business debts are dough the operation of the busines | ebts that you incurred to obtain mess or investment. | oney | |
| | | | ☐ No. Go to | line 16c. | | | | |
| | | | ☐ Yes. Go to | o line 17. | | | | |
| | | 16c. | State the type | of debts you owe that | at are not consumer debts or busin | ness debts | | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing | ı under Chapter 7. G | o to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | I am filing und paid that fund | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | | | |
| | administrative expenses | | □ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | | | |
| 18. | How many Creditors do | 1-49 | | | □ 1,000-5,000 | 25,001-50,000 | | |
| | you estimate that you owe? | 50-99 | | | □ 5001-10,000 | 50,001-100,000 | | |
| | | ☐ 100-19 ☐ 200-9 | | | □ 10,001-25,000 | ☐ More than100,000 |). | |
| 19. | How much do you estimate your assets to | <u></u> \$0 - \$ | | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 | billion | |
| | be worth? | \$50,001 - \$100,000 | | | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - s | \$10 billion | |
| | | \$100,001 - \$500,000 \$500,001 - \$1 million | | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millior | ☐ \$10,000,000,001 - n ☐ More than \$50 bill | | | |
| 20. | How much do you estimate your liabilities to | \$0 - \$5 | | | □ \$1,000,001 - \$10 million | \$500,000,001 - \$1 | billion | |
| | be? | | 01 - \$100,000 | | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | \$1,000,000,001 - | | |
| | | | 001 - \$500,000 001 - \$1 million | | □ \$100,000,001 - \$100 million | ☐ \$10,000,000,001 ☐ More than \$50 bil | | |
| Part | 7: Sign Below | | | | | | | |
| For | you | I have exa | mined this petit | tion, and I declare un | der penalty of perjury that the info | ormation provided is true and corre | ct. | |
| | | If I have of States Co | :hosen to file ur de. I understan | nder Chapter 7, I am Id the relief available | aware that I may proceed, if eligunder each chapter, and I choose | gible, under Chapter 7, 11,12, or to proceed under Chapter 7. | 13 of title 11, United | |
| | | If no attori | ney represents ined and read tl | me and I did not pay he notice required by | or agree to pay someone who is r 11 U.S.C. § 342(b). | not an attorney to help me fill out th | nis document, I | |
| | | I request | relief in accord | ance with the chapte | er of title 11, United States Code, | specified in this petition. | | |
| | (| l understa | nd making a fal result in fines u | se statement, conce p to \$250,000, or imp | aling property, or obtaining money prisonment for up to 20 years, or b | or property by fraud in connection ooth. 18 U.S.C. §§ 152, 1341, 151 | n with a bankruptcy 9, and 3571. | |
| | · | | A. Cliften of Debtor 1 | | Signature of D | Debtor 2 | | |
| | | Executed | 7 | | Executed on | | | |
| | | | MM / DD | / YYYY | | MM / DD / YYYY | | |

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| Debtor 1 Clifton, Cynthia A | A. Case number (if known) |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. Date April 17, 2017 MM / DD / YYYY |
| | Brian Wright Printed name Brian Wright & Associates, P.C. Firm name 437 West State Street Suite 101 Sycamore, IL 60178 Number, Street, City, State & ZIP Code Contact phone (815) 895-2074 Email address bw@wrightandassociateslaw.com 6304330 Bar number & State |

| | Case 17-80932 | Doc 1 Filed 04/. | | 17 10:44:52 | Desc Main |
|---------------------|---------------------------|-------------------|----------------------------|-------------|------------------------------------|
| Fill in this inf | formation to identify yoເ | ır case: | | | |
| Debtor 1 | Cynthia A. Clif | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DIVIS | ON | |
| Case number | | | | ľ | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | |
| Official F | Form 106Sum | | | | |
| Summar | 12/15 | | | | |

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Pa | art 1: Summarize Your Assets | | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------|
| | | Your as | ssets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 129,900.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 4,629.48 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 134,529.48 |
| Pa | art 2: Summarize Your Liabilities | | |
| | | | abilities you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 122,775.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &*chedule E/F | \$ | 56,172.00 |
| | Your total liabilit | ties \$ | 178,947.00 |
| Pa | art 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oschedule I | \$ | 3,022.17 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,640.09 |
| Pa | art 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other schedul | les. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159. | · a personal, fam | nily, or household |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules. | is box and subm | nit this form to the |

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Debtor 1 Clifton, Cynthia A. Document Page 9 of 51 Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,059.92

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | 1 |
|------------------------------------------------------------------------------------------------------------------------------|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 17-80932 Doc 1 Filed 04/19/17 Entered 04/19/17 10:44:52 Desc Main Document Page 10 of 51 Fill in this information to identify your case and this filing: Debtor 1 Cynthia A. Clifton Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION Case number Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| 1. Do you d | own or have any legal or eq | uitable interest in a | y residence, building, land, | or similar property? | | |
|-------------|-------------------------------------------------|------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------|--------------------------------------------------------------------------|
| ☐ No. G | So to Part 2. | | | | | |
| ■ Yes. | Where is the property? | | | | | |
| 1.1 | | | What is the property? Che | ck all that apply | | |
| | River Dr address, if available, or other des | scription | ■ Single-family home □ Duplex or multi-unit □ Condominium or cod | building | | aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. |
| Dek | Kalb IL State | 60115-1922 ZIP Code | ☐ Manufactured or mo☐ Land☐ Investment property | | Current value of the entire property? \$129,900.00 | Current value of the portion you own? \$129,900.00 |
| | | | ☐ Timeshare ☐ Other Who has an interest in the | e property? Check one | | /our ownership interest lancy by the entireties, or |
| Count | у | | Debtor 2 only Debtor 1 and Debtor At least one of the d | r 2 only ebtors and another sh to add about this item, s | Check if this is con | nmunity property |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$129,900.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| | | Case 17- | 80932 Doc 1 | | Entered 04/19 | 9/17 10:44:52 | Desc | Main |
|----------------|---------------------|------------------------------------------------------------|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------|---------------------|------------------------------------------------------------------------------|
| Debto | or 1 | Clifton, Cyr | thia A. | Document | Page 11 of 51 | ase number (if known) | | |
| 3. Ca ı | rs, var | ns, trucks, trac | tors, sport utility vel | nicles, motorcycles | | | | |
| □ 1 | No | | | | | | | |
| | Yes | | | | | | | |
| | | | | | | | | |
| 3.1 | Make | <u>-</u> | | Who has an interest in th | e property? Check one | | | or exemptions. Put aims on Schedule D: |
| | Mode | | herokee | Debtor 1 only | | Creditors Who Ha | ve Claims S | Secured by Property. |
| | Year: | 2002 eximate mileage: | 149500 | ☐ Debtor 2 only☐ Debtor 1 and Debtor 2 | only | Current value of entire property? | | urrent value of the ortion you own? |
| | | r information: | 143300 | At least one of the debt | | chare property: | P. | ortion you own. |
| | | | | Check if this is comm (see instructions) | | \$2,500 | 0.00 | \$2,500.00 |
| .yo | u hav | e attached for | | n for all of your entries from the series from | | | | \$2,500.00 |
| Do yo | ou ow | n or have any l | egal or equitable into | erest in any of the follow | ing items? | | port Do r | rent value of the ion you own? not deduct secured ns or exemptions. |
| Ex | <i>ample</i> No | old goods and f es: Major applian Describe | ces, furniture, linens, | china, kitchenware washer/dryer, couch a | and chair, china cah | inet | | |
| | | | dresser, bed, 20 | | | | | \$925.00 |
| | <i>ample</i> No | es: Televisions a | nd radios; audio, video I phones, cameras, m | o, stereo, and digital equipm ledia players, games | ent; computers, printers, | scanners; music collec | tions; elec | tronic devices \$300.00 |
| Ex | <i>rample</i> No | | figurines; paintings, p nemorabilia, collectibl | rints, or other artwork; book les | s, pictures, or other art ob | ojects; stamp, coin, or l | oaseball ca | ard collections; other |
| Ex | ample No | ent for sports and as: Sports, photo instruments Describe | | l other hobby equipment; bio | cycles, pool tables, golf cl | ubs, skis; canoes and | kayaks; ca | rpentry tools; musical |
| 10. Fi | | | s, shotguns, ammunit | ion, and related equipment | t | | | |
| | No Yes. | Describe | | | | | | |

| Del | btor 1 | Clifton, Cynthia A. | Docur | nent | Page 12 c | Case number (if known) | |
|--------------|----------------------------------------|-----------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------|---------------------------------------|--------------------------------|-----------------------------------------------------------------------------------|
| | Clothes Examp □ No | s les: Everyday clothes, furs, lea | ther coats, designer wea | r, shoes, acc | essories | | |
| ı | Yes. | Describe clothing | | | | | \$350.00 |
| | Jewelry <i>Examp</i> □ No | | e jewelry, engagement rin | gs, wedding | rings, heirloom | jewelry, watches, gems, gold, | silver |
| ı | Yes. | Describe Costume | jewelry | | | | \$150.00 |
| 4. | Examp ■ No □ Yes. Any oth | m animals les: Dogs, cats, birds, horses Describe ner personal and household | items you did not alre: | ady list, incl | uding any hea | ılth aids you did not list | |
| _ | ■ No □ Yes. | Give specific information | | | | | |
| 15. | | ne dollar value of all of your . Write that number here | , | | • | ges you have attached for | \$1,725.00 |
| Par | t 4: Des | scribe Your Financial Assets | | | | | |
| Do | you ow | n or have any legal or equit | able interest in any of t | he following | j ? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| į | No . | les: Money you have in your w | , | · | ox, and on hand | d when you file your petition | |
| | | ts of money les: Checking, savings, or othe institutions. If you have n | er financial accounts; cer nultiple accounts with the | tificates of de e same instit | posit; shares ir ution, list each. | n credit unions, brokerage hou | ses, and other similar |
| ı | Yes | | | nstitution na | me: | | |
| | | 17.1. C | | First Natio 7910 | nal Bank | | \$404.48 |
| | Examp ■ No | mutual funds, or publicly tr les: Bond funds, investment ar | | rms, money | narket account | s | |
| | joint v | | ests in incorporated a | nd unincorp | orated busine | sses, including an interest i | n an LLC, partnership, and |
| | ■ No □ Yes. | Give specific information abo Name o | ut them of entity: | | | % of ownership: | |
| _ | Negotia | ment and corporate bonds able instruments include personagotiable instruments are those | nal checks, cashiers' che | ecks, promis | sory notes, and | money orders. | |
| | | Give specific information about | | | | | |

Schedule A/B: Property

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Case 17-80932 Doc 1 Filed 04/19/17 Entered 04/19/17 10:44:52 Desc Main Document Page 13 of 51 Debtor 1 Case number (if known) Clifton, Cynthia A. 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No

31. Interests in insurance policies

☐ Yes. Give specific information..

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

■ No

 \square Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary: Surrender or refund

value:

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|----------------|----------------------------------------------------------------------|-------------------|----------------------------|-----------------------|-------------------------------|------------------------------|
| Debt | or 1 Clifton, Cynthia A. | | Document | Page 14 of | Case number (if known) | |
| 32. A | ny interest in property that is d | lue you from | someone who has died | | | |
| I | f you are the beneficiary of a living lied. | trust, expect p | proceeds from a life insu | ance policy, or are | currently entitled to receive | property because someone has |
| | No | | | | | |
| | Yes. Give specific information | | | | | |
| | | | | | | |
| | laims against third parties, whe Examples: Accidents, employmen | | | | d for payment | |
| | No | it disputes, iris | diance claims, or rights | to sue | | |
| | Yes. Describe each claim | | | | | |
| 34 0 | ther contingent and unliquidate | ed claims of e | every nature including | counterclaims of | the debtor and rights to s | set off claims |
| | No | ca ciaiiiis oi c | very nature, moraumy | counter claims of | the debtor and rights to s | oct on claims |
| | Yes. Describe each claim | | | | | |
| 35 Δ | ny financial assets you did not | already list | | | | |
| | No | uncuuy not | | | | |
| | Yes. Give specific information | | | | | |
| | | | | | | |
| 36. | Add the dollar value of all of yo Part 4. Write that number here. | | | | | \$404.48 |
| | | | | | | |
| Part 5 | Describe Any Business-Related | l Property You | Own or Have an Interest I | n. List any real esta | te in Part 1. | |
| 37. D o | you own or have any legal or equi | itable interest i | n any business-related pr | operty? | | |
| _ | No. Go to Part 6. | | | | | |
| | Yes. Go to line 38. | | | | | |
| | | | | | | |
| Part (| Describe Any Farm- and Comm | ercial Fishing-l | Related Property You Owi | n or Have an Interes | t In. | |
| | If you own or have an interest in fa | | | | | |
| 46. D | o you own or have any legal or | equitable int | erest in any farm- or co | ommercial fishing | -related property? | |
| ı | No. Go to Part 7. | | | | | |
| I | Yes. Go to line 47. | | | | | |
| | | | | | | |
| Part 7 | Describe All Property You | Own or Have a | n Interest in That You Did | Not List Above | | |
| | o you have other property of a | | | | | |
| | Examples: Season tickets, country | y club membe | rship | | | |
| | No Yes. Give specific information | | | | | |
| _ | res. Give specific information | •••• | | | | |
| 54. | Add the dollar value of all of yo | our entries fro | om Part 7. Write that nu | mber here | | \$0.00 |
| | | | | | | |
| Part 8 | List the Totals of Each Part | of this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | | \$129,900.00 |
| | Part 2: Total vehicles, line 5 | | | \$2,500.00 | | <u> </u> |
| 57. | Part 3: Total personal and hous | sehold items, | line 15 | \$1,725.00 | | |
| 58. | Part 4: Total financial assets, li | ne 36 | _ | \$404.48 | | |
| | Part 5: Total business-related p | | | \$0.00 | | |
| | Part 6: Total farm- and fishing- | | | \$0.00 | | |
| 61. | Part 7: Total other property not | t listed, line 5 | + | \$0.00 | | |
| 62. | Total personal property. Add lir | nes 56 through | n 61 | \$4,629.48 | Copy personal property to | stal \$4,629.48 |
| 63. | Total of all property on Schedu | ıle A/B. Add li | ne 55 + line 62 | | | \$134,529.48 |
| | | | | | | ψ.υ¬,υ=υ.¬υ |

| | | 17(1,1111) | | |
|---------------------|--------------------------|-------------------|-----------------------------|----|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Cynthia A. Clifto | n | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DIVISI | ON |
| Case number | | | | |
| (if known) | | | | |
| | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | Part 1: | Identify the Property You Claim as Exempt |
|--|---------|-------------------------------------------|
|--|---------|-------------------------------------------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| | Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | |
|------|------------------------------------------------------------------------|-----------------------------------------|-----|-----------------------------------------------------------------|------------------------------------|--|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | Jeep Grand Cherokee | \$2,500.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| | 2002 149500 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Jeep Grand Cherokee | \$2,500.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | |
| | 2002 149500 Line from Schedule A/B 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Fridge/freezer, washer/dryer, couch and chair, china cabinet, dresser, | \$925.00 | | \$925.00 | 735 ILCS 5/12-1001(b) | |
| | bed, 20 VHS Line from Schedule A/B. 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | TV Line from Schedule A/B 7.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) | |
| | Line Hori Generalie ALL 111 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | clothing Line from Schedule A/B 11.1 | \$350.00 | | \$350.00 | 735 ILCS 5/12-1001(a) | |
| Line | Line non ochequie A/D. TT-T | | | 100% of fair market value, up to any applicable statutory limit | | |

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| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|---------|-----------------------------------------------------------------|------------------------------------|
| | Copy the value from Check only one box for each exemption. Schedule A/B | | | |
| Costume jewelry Line from Schedule A/B 12.1 | \$150.00 | | \$150.00 | 735 ILCS 5/12-1001(b) |
| LITE HOIT SCHEdule AVE. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| First National Bank 7910 | \$404.48 | | \$404.48 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B. 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 y ■ No □ Yes. Did you acquire the property covered □ No □ Yes | years after that for case | s filed | , | |

| | | Document | Page 17 | of 51 | _ | |
|----------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------------------------------------------|----------------------------------------------|--------------------------|
| Fill in this inform | ation to identify you | ır case: | | | | |
| Debtor 1 | Cynthia A. Clift | ton | | | | |
| | First Name | Middle Name | Last Name | |) | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ban | kruptcy Court for the | NORTHERN DISTRICT OF I | ILLINOIS, WEST | ERN DIVISION | | |
| Case number | | | | | _ | if this is an |
| | | | | | amend | ded filing |
| Official Form | 106D | | | | | |
| | | s Who Have Claims | s Secured | by Propert | У | 12/15 |
| | | If two married people are filing toge t, number the entries, and attach it t | | | | |
| 1. Do any creditors h | nave claims secured by | y your property? | | | | |
| ☐ No. Check | this box and submit th | nis form to the court with your other | schedules. You h | nave nothing else to re | port on this form. | |
| Yes. Fill in | all of the information b | pelow. | | | | |
| Part 1: List All | Secured Claims | | | | | |
| 2. List all secured o | laims. If a creditor has | more than one secured claim, list the c | reditor separately | Column A | Column B | Column C |
| for each claim. If mo | ore than one creditor has | s a particular claim, list the other credit cal order according to the creditor 's n | ors in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| | Resolutions | Describe the property that secure | s the claim: | \$122,775.00 | \$0.00 | \$122,775.00 |
| Creditor's Name | | | | | | |
| Attus David | | | | | | |
| Attn: Bank PO Box 36 | | As of the date you file, the claim is | s: Check all that | | | |
| | 75235-1655 | apply. Contingent | | | | |
| | City, State & Zip Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the deb | ot? Check one. | Nature of lien. Check all that apply | /. | | | |
| Debtor 1 only | | An agreement you made (such a | as mortgage or secu | ıred | | |
| Debtor 2 only | | car loan) | | | | |
| ☐ Debtor 1 and Del | otor 2 only | ☐ Statutory lien (such as tax lien, n | nechanic's lien) | | | |
| | e debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this cla | | Other (including a right to offset) | | | | |
| community deb | ot | | | | | |
| Date debt was incu | rred 2010-03 | Last 4 digits of account nu | mber <u>8033</u> | | | |
| | | | | | | |
| Add the dollar value | e of your entries in Co | lumn A on this page. Write that num | ber here: | \$122,775 | .00 | |
| If this is the last page. Write that number h | | ne dollar value totals from all pages. | | \$122,775 | .00 | |
| Part 2: List Oth | ers to Re Notified fo | r a Debt That You Already Liste | d | | | |
| Use this page only trying to collect fro than one creditor for | if you have others to b m you for a debt you o | be notified about your bankruptcy fo we to someone else, list the credito t you listed in Part 1, list the addition | r a debt that you a | en list the collection ag | ency here. Similarly, if y | ou have more |
| | not mi out or submit ti | no page. | | | | |
| | er, Street, City, State & | | On which | h line in Part 1 did you er | nter the creditor? 2.1 | |
| | Lindberg, Oliver iehl Rd Ste 120 | , LLC | | gits of account number | | |
| | e, IL 60563-4917 | | Lasi 4 Ui | gito of account number _ | | |

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| Debtor | 1 Cynthia A. C | lifton | | Case number (f know) |
|--------|--------------------------------------------------------------------------|-------------|-----------|-----------------------------------------------------------------------------------------------|
| | First Name | Middle Name | Last Name | |
| | Name, Number, Street Bankamerica 4909 Savarese C Tampa, FL 3363 | | | On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number 8033 |

| | 0430 17 00302 | Document | Page 1 | 9 of 51 | <i>52 D</i> 00 | o mani |
|-----------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------------------------------|
| Fill in this | information to identify your | | | | | |
| Debtor 1 | Cynthia A. Clifton | n | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, fili | ng) First Name | Middle Name | Last Name | | | |
| (Spouse II, IIII | ng) Filst Name | | | | | |
| United Sta | ites Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | LINOIS, WES | TERN DIVISION | | |
| Case num | ber | | | | | |
| (if known) | | | | | _ | heck if this is an |
| | | | | | ar | mended filing |
| Official | Form 106E/F | | | | | |
| | | ho Have Unsecured | Claims | | | 12/15 |
| ny executo schedule G creditors he Continu | ry contracts or unexpired leases Executory Contracts and Unexp Who Have Claims Secured by Pr | e Part 1 for creditors with PRIORIT' that could result in a claim. Also li- ired Leases (Official Form 106G). Di roperty. If more space is needed, co ve no information to report in a Part | st executory c o not include a py the Part yo | ontracts on Schedule A/B: Pro any creditors with partially sec u need, fill it out, number the | operty (Official cured claims tl entries in the l | Form 106A/B) and on hat are listed in Schedule boxes on the left. Attach |
| Part 1: | List All of Your PRIORITY Un | secured Claims | | | | |
| 1. Do any | creditors have priority unsecure | d claims against you? | | | | |
| ■ No. | Go to Part 2. | | | | | |
| ☐ Yes | | | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 3. Do any | creditors have nonpriority unsec | cured claims against you? | | | | |
| ☐ No. | You have nothing to report in this p | art. Submit this form to the court with | your other sche | dules. | | |
| ■ Yes | | | | | | |
| unsecu | red claim, list the creditor separately | aims in the alphabetical order of the y for each claim. For each claim listed, ist the other creditors in Part 3.If you h | identify what t | ype of claim it is. Do not list clair | ກs already inclu | ided in Part 1. If more |
| | | | | | | Total claim |
| 4.1 A ı | mex | Last 4 digits of acc | ount number | 7843 | | \$5,145.00 |
| | onpriority Creditor's Name | Mileon was the debt | in a compand O | 2005 44 | • | |
| | orrespondence O Box 981540 | When was the debt | incurred? | 2005-11 | | |
| | Paso, TX 79998-1540 | | | | | |
| | imber Street City State ZIp Code | As of the date you | file, the claim | is: Check all that apply | | |
| _ | ho incurred the debt? Check one. | _ | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | UTV | d alatina | | |
| | At least one of the debtors and and | П | ii i unsecure | a Ciaim: | | |
| de | Check if this claim is for a cominibut the claim subject to offset? | | | ration agreement or divorce tha | t you did not | |
| | No | | | g plans, and other similar debts | | |
| | l Yes | <u>_</u> | - F. 2.34 G. G. G. | 51 2000 | | |
| | 1 100 | Other. Specify | | | | |

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Case number (f know)

| DCD | Cinton, Cyntina A. | | | |
|-----|--------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| 4.2 | Chase Card | Last 4 digits of account number | 9559 | \$2,780.00 |
| | Nonpriority Creditor's Name Attn: Correspondence Dept PO Box 15298 | When was the debt incurred? | 2006-11 | |
| | Wilmington, DE 19850-5298 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.2 | Ohana Cand | Look A divite of account number | 0040 | \$0.054.00 |
| 4.3 | Chase Card Nonpriority Creditor's Name | Last 4 digits of account number | 9842 | \$2,251.00 |
| | Attn: Correspondence Dept PO Box 15298 | When was the debt incurred? | 2005-06 | |
| | Wilmington, DE 19850-5298 | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? ■ | report as priority claims | and an arrangement of the second seco | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.4 | Comenity Bank/Carsons | Last 4 digits of account number | 3535 | \$2,468.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | 2005-07 | |
| | PO Box 182125 | | 2000 01 | |
| | Columbus, OH 43218-2125 | _ | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharir | g plans, and other similar debts | |
| | | <u> </u> | אַ אָישּיים, מווט טווטו אוווומו עכטנא | |
| | Yes | Other Specify | | |

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| Debto | Clifton, Cynthia A. | | Case number (if know) | |
|-------|------------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------|-------------|
| 4.5 | Credit First National Assoc Nonpriority Creditor's Name | Last 4 digits of account number | 0371 | \$1,885.00 |
| | Attn: BK Credit Operations PO Box 81315 | When was the debt incurred? | 2016-05-02 | |
| | Cleveland, OH 44181-0315 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.6 | Fed Loan Sevicing Nonpriority Creditor's Name | Last 4 digits of account number | 0004 | \$15,420.00 |
| | Nonphonty Creditor's Name | When was the debt incurred? | 2011-10 | |
| | PO Box 69184 Harrisburg, PA 17106-9184 | _ | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.7 | Fed Loan Sevicing Nonpriority Creditor's Name | Last 4 digits of account number | 0003 | \$6,341.00 |
| | Nonphonty Oreanor's Name | When was the debt incurred? | 2015-07 | |
| | PO Box 69184 Harrisburg, PA 17106-9184 | _ | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other Specify | | |

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Debtor 1 Clifton, Cynthia A. Case number (if know) 4.8 \$4,134.00 Fed Loan Sevicing Last 4 digits of account number 0006 Nonpriority Creditor's Name When was the debt incurred? 2016-02 PO Box 69184 Harrisburg, PA 17106-9184 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 **Fed Loan Sevicing** Last 4 digits of account number 0002 \$3,500.00 Nonpriority Creditor's Name When was the debt incurred? 2015-07 PO Box 69184 Harrisburg, PA 17106-9184 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.10 **Fed Loan Sevicing** Last 4 digits of account number 0005 \$3,000.00 Nonpriority Creditor's Name When was the debt incurred? 2016-02 PO Box 69184 Harrisburg, PA 17106-9184 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Clifton, Cynthia A. Case number (if know) 4.11 \$6,096.00 Navy Federal Cr Union Last 4 digits of account number 6536 Nonpriority Creditor's Name When was the debt incurred? 2006-03 PO Box 3000 Merrifield, VA 22119-3000 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.12 Synchrony Bank/Care Credit Last 4 digits of account number 2479 \$897.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 2016-08 PO Box 956060 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.13 Synchrony Bank/Lowes Last 4 digits of account number \$900.00 2317 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 2016-01 PO Box 956060 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Document Page 24 of 51 Case number (if know) Debtor 1 Clifton, Cynthia A. 4.14 \$1,355.00 Target Last 4 digits of account number 5654 Nonpriority Creditor's Name C/O Financial & Retail Srvs When was the debt incurred? 2015-08 Mailstopn BT PO Box 9475 Minneapolis, MN 55440-9475 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Amex Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 297871 ■ Part 2: Creditors with Nonpriority Unsecured Claims Fort Lauderdale, FL 33329-7871 Last 4 digits of account number 7843 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Chase Card ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 15298 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19850-5298 Last 4 digits of account number 9559 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Chase Card Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 15298 Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19850-5298 Last 4 digits of account number 9842 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Comenity Bank/Carsons** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3100 Easton Square PI Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43219-6232 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Credit First N A Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 6275 Eastland Rd ■ Part 2: Creditors with Nonpriority Unsecured Claims Brook Park, OH 44142-1301 Last 4 digits of account number 0371 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Fed Loan Serv ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.6 of (Check one): PO Box 60610 Part 2: Creditors with Nonpriority Unsecured Claims Harrisburg, PA 17106-0610 Last 4 digits of account number 0004 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Fed Loan Serv PO Box 60610 Harrisburg, PA 17106-0610

Line 4.7 of (Check one):

Last 4 digits of account number

☐ Part 1: Creditors with Priority Unsecured Claims

0003

Part 2: Creditors with Nonpriority Unsecured Claims

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Case number (if know) Debtor 1 Clifton, Cynthia A. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Fed Loan Serv Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 60610 ■ Part 2: Creditors with Nonpriority Unsecured Claims Harrisburg, PA 17106-0610 Last 4 digits of account number 0006 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Fed Loan Serv Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 60610 Part 2: Creditors with Nonpriority Unsecured Claims Harrisburg, PA 17106-0610 Last 4 digits of account number 0002 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Fed Loan Serv Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 60610 ■ Part 2: Creditors with Nonpriority Unsecured Claims Harrisburg, PA 17106-0610 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Navy Federal Cr Union** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 3700 ■ Part 2: Creditors with Nonpriority Unsecured Claims Merrifield, VA 22119-3700 Last 4 digits of account number 6536 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Syncb/Care Credit Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 950 Forrer Blvd Part 2: Creditors with Nonpriority Unsecured Claims Kettering, OH 45420-1469 Last 4 digits of account number 2479 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Syncb/lowes Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 956005 Part 2: Creditors with Nonpriority Unsecured Claims Orlando, FL 32896 Last 4 digits of account number 2317 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Part 4: Add the Amounts for Each Type of Unsecured Claim

Td Bank USA/Targetcred

Minneapolis, MN 55440-0673

PO Box 673

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

☐ Part 1: Creditors with Priority Unsecured Claims

5654

Part 2: Creditors with Nonpriority Unsecured Claims

| | | | | 1 | Total Claim |
|--------------|-----|---------------------------------------------------------------------------------------------------------|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | - | Total Claim |
| Total claims | 6f. | Student loans | 6f. | \$ | 0.00 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 56,172.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 56,172.00 |

Line 4.14 of (Check one):

Last 4 digits of account number

| | | | 111 FAUE / 0 UL 3 L | |
|---------------------|--------------------------|-------------------|------------------------------|----|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Cynthia A. Clifto | n | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DIVISIO | DN |
| Case number _ | | | | |
| (II KIIOWII) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Name Number Street State ZIP Code | | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP | contract or lease | State what the contract or lease is for |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-------------------------------|-----------------------------------------------------|-------------------|-----------------------------------------|
| Number Street | 2.1 | | | | | |
| City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | _ |
| Number Street | | | Street | | | _ |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Street Street Street Street State ZIP Code | | City | | State | ZIP Code | |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | 2.2 | | | | | |
| City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Name Number Street Street | | Name | | | | |
| 2.3 | | Number | Street | | | _ |
| Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | City | | State | ZIP Code | _ |
| Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | 2.3 | | | | | |
| City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | _ |
| 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Number | Street | | | <u> </u> |
| Number Street City State ZIP Code 2.5 Name Number Street | | City | | State | ZIP Code | |
| Number Street City State ZIP Code 2.5 Name Number Street | 2.4 | | | | | |
| City State ZIP Code 2.5 Name Number Street | | Name | | | | _ |
| Number Street | | | Street | | | |
| Number Street | | City | | State | ZIP Code | |
| Number Street | 2.5 | | | | | |
| | | Name | | | | |
| City State ZIP Code | | Number | Street | | | _ |
| | | City | | State | ZIP Code | |

| | | Docume | ent Page 27 d | of 51 | |
|-------------------------|---------------------------------------------------------------|---------------------------------|----------------------------|---------------------------------------------------------------------------------------------|-------------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Cynthia A. Clifto | n | | | |
| DCDIOI 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filir | ng) First Name | Middle Name | Last Name | | |
| United Star | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTE | RN DIVISION | |
| Casa numb | har | | | | |
| Case numb (if known) | | | | ☐ Check if | this is an |
| | | | | amende | d filing |
| ~ · · · | | | | | |
| | l Form 106H | | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| | | | | complete and accurate as possible. If two | |
| are filing to | gether, both are equally res | ponsible for supplying co | rrect information. If m | ore space is needed, copy the Additional F | age, fill it out, |
| | er the entries in the boxes on er (if known). Answer every | | onal Page to this page | . On the top of any Additional Pages, write | your name and |
| | o. (o,. /o o. o. o. , | 4 | | | |
| 1. Do y | you have any codebtors? (If | you are filing a joint case, do | o not list either spouse a | s a codebtor. | |
| ■ No | | | | | |
| ■ No | | | | | |
| □ 163 | | | | | |
| | | | | ? (Community property states and territories | include Arizona, |
| Califor | nia, Idaho, Louisiana, Nevada | , New Mexico, Puerto Rico, | Texas, Washington, ar | d Wisconsin.) | |
| ■ No | Go to line 3. | | | | |
| _ | . Did your spouse, former spou | se, or legal equivalent live w | ith you at the time? | | |
| | | , 9 | , | | |
| | | | | | |
| | | | | f your spouse is filing with you. List the po e you have listed the creditor on Schedule | |
| | | | | se Schedule D, Schedule E/F, or Schedule | |
| Colum | nn 2. | | | | |
| (| Column 1: Your codebtor | | | Column 2: The creditor to whom you | owe the debt |
| 1 | Name, Number, Street, City, State and 2 | ZIP Code | | Check all schedules that apply: | |
| 0.4 | | | | O O de estado Da Para | |
| 3.1 | Name | | | □ Schedule D, line □ □ Schedule E/F, line | |
| | | | | Schedule G, line | |
| _ | | | | | |
| | Number Street City | State | ZIP Code | | |
| | City | State | ZIF Code | | |
| | | | | _ | |
| 3.2 | Nome | | | Schedule D, line | |
| | Name | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your ca | se: | | | | | | | |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------------------------|---------------------------|----------------|----------------------------------|--------------------------|------------------------------------|--------------|
| Del | btor 1 Cynthia A. C | lifton | | | _ | | | | |
| _ | btor 2 puse, if filing) | | | | _ | | | | |
| Uni | ited States Bankruptcy Court for the: | NORTHERN DISTRIC | CT OF ILLINOIS, | WESTERN | _ | | | | |
| | se number nown) | | | | | | ded filing ment shov | ving postpetition of | chapter 13 |
| 0 | fficial Form 106I | | | | | MM / DE | / YYYY | | |
| S | chedule I: Your Inco | ome | | | | 1411417 25 | , | | 12/15 |
| sup spo atta | as complete and accurate as possi plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O | re married and not filin spouse is not filing wit | g jointly, and yo h you, do not in | ur spouse is lude informa | livino tion | g with you, inc about your sp | lude infor ouse. If m | mation about your some space is ne | our eded, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debto | r 2 or nor | n-filing spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status* | ■ Employed | | | ☐ En | ployed | | |
| | | Employment status | ☐ Not employed | | | □ No | ☐ Not employed | | |
| | employers. | Occupation | See Schedu | le Attached | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed th | | Attachment | for A | dditional Emp | oyment l | nformation | |
| | Give Details About Mon | | ou boug pathing t | roport for one | . lin a | write CO in the | anaaa laal | luda vaur aan filir | |
| | mate monthly income as of the dates you are separated. | te you file this form. If y | ou nave nothing to | report for any | ine, | write \$0 in the | space. Inc | iude your non-iiir | ig spouse |
| | ou or your non-filing spouse have more ce, attach a separate sheet to this form | | oine the information | on for all emplo | yers | for that person | on the lines | s below. If you ne | ed more |
| | | | | | | For Debtor 1 | | Debtor 2 or filing spouse | |
| 2. | List monthly gross wages, salary deductions). If not paid monthly, ca | | | 2. | \$_ | 1,388.5 | <u>7</u> \$_ | N/A | |
| 3. | Estimate and list monthly overting | ne pay. | | 3. | +\$_ | 0.0 | <u> </u> | N/A | |
| 4. | Calculate gross Income. Add line | e 2 + line 3. | | 4. | \$_ | 1,388.57 | \$ | N/A | |

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| Debt | tor 1 | Clifton, Cynthia A. | _ | Cas | e number (if known) | | | |
|------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------|---------------------|----------|--------------------------------|----------|
| | | | | Fo | or Debtor 1 | | Debtor 2 or n-filing spouse | |
| | Cop | py line 4 here | 4. | \$_ | 1,388.57 | \$ | N/A | |
| 5. | List | t all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 417.40 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | 0.00 | — | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | . \$ | 0.00 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | | N/A | |
| | 5h. | Other deductions. Specify: | 5h. | .+ \$_ | 0.00 | _ + \$ _ | N/A | |
| 6. | Add | d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 417.40 | _ \$_ | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 971.17 | \$_ | N/A | |
| 8. | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | · - | 0.00 | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | | N/A | |
| | 8d. | Unemployment compensation | 8d. | . \$ | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | — 8g. | . \$ | 0.00 | | N/A | |
| | 8h. | Other monthly income. Specify: | 8h. | + \$ | 0.00 | + \$ _ | N/A | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 0.00 | \$_ | N/A |] |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 971.17 + | 5 | N/A = \$ | 971.17 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | | | | | |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your deer friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify: Live in Boyfriend, Mother and Adult Daughter | epende | | • | | | 2,051.00 |
| 12. | | d the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | | 3,022.17 |
| | | | | | | | Combine monthly | |
| 13. | Do | you expect an increase or decrease within the year after you file this form' No. Yes. Explain: | ? | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Debtor 1 Clifton, Cynthia A. Case number (if known) | n, Cynthia A. Case number (if known) | |
|-----------------------------------------------------|--------------------------------------|--|
|-----------------------------------------------------|--------------------------------------|--|

Official Form B 6I Attachment for Additional Employment Information

| Debtor | | |
|---------------------|-----------------------|--|
| Occupation | Cosmetology | |
| Name of Employer | Hair Cuttery | |
| How long employed | 1 months | |
| Address of Employer | | |
| Debtor | | |
| Occupation | | |
| Name of Employer | TJ Maxx | |
| How long employed | | |
| Address of Employer | 2353 Sycamore Rd | |
| | DeKalb, IL 60115-2007 | |

Official Form 106I Schedule I: Your Income page 3

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| Fill | in this information to identify you | ur case: | | | | |
|---------------|--------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------|--------------------------------------------------------------|----------------------------------------------|
| Deb | tor 1 Cynthia A. C | lifton | | Chec | ck if this is: | |
| | tor 2 buse, if filing) | | | | An amended filing A supplement show expenses as of the | ring postpetition chapter 13 following date: |
| Unit | ed States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLING WESTERN DIVISION | OIS, | - | MM / DD / YYYY | |
| 1 | e number nown) | | | | | |
| 0 | fficial Form 106J | | | | | |
| S | chedule J: Your E | xpenses | | | | 12/1 |
| info (if I | ormation. If more space is nee known). Answer every question t 1: Describe Your Housel | | | | | |
| 1. | Is this a joint case? ■ No. Go to line 2. | | | | | |
| | Yes. Does Debtor 2 live in | a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 mus | t file Official Form 106J-2,Expenses f | for Separate Househole | dof Debtor | · 2. | |
| 2. | Do you have dependents? | □No | | | | |
| | Do not list Debtor 1 and Debtor 2. | Yes. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | ship to | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | Mother | | 74 | ■ Yes □ No |
| | | | | | | ☐ Yes |
| | | | | | | □ No |
| | | | | | | ☐ Yes ☐ No |
| | | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other th yourself and your dependen | | | | | |
| exp | imate your expenses as of yo | g Monthly Expenses ur bankruptcy filing date unless yo ankruptcy is filed. If this is a supple | | | | |
| val | | on-cash government assistance if ye included it on Schedule I: Your la | | | Your exp | enses |
| - | · | | | | | |
| 4. | The rental or home ownersh payments and any rent for the | lip expenses for your residence. Ind ground or lot. | clude first mortgage | 4. \$ | | 1,125.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. \$ | i | 0.00 |
| | 4b. Property, homeowner's, | | | 4b. \$ | | 0.00 |
| | · ' | pair, and upkeep expenses on or condominium dues | | 4c. \$ 4d. \$ | | 0.00 |
| 5. | | on or condominium dues nts for your residence, such as hom | ne equity loans | 4a. \$ 5. \$ | | 0.00 |

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| ebtor 1 | Clifton, Cynthia A. | Case num | ber (if known) | |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------|-----------------------------|
| Utilit | ies: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 120.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 100.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 150.09 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| Food | I and housekeeping supplies | 7. | \$ | 500.00 |
| Child | dcare and children's education costs | 8. | \$ | 0.00 |
| Cloti | ning, laundry, and dry cleaning | 9. | | 50.00 |
| | onal care products and services | 10. | · | 50.00 |
| | ical and dental expenses | 11. | | 0.00 |
| | sportation. Include gas, maintenance, bus or train fare. | | | |
| | ot include car payments. | 12. | \$ | 400.00 |
| | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 50.00 |
| Char | itable contributions and religious donations | 14. | \$ | 0.00 |
| Insu | rance. | | | |
| Do n | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. | Life insurance | 15a. | \$ | 0.00 |
| 15b. | Health insurance | 15b. | \$ | 0.00 |
| 15c. | Vehicle insurance | 15c. | \$ | 95.00 |
| 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| Taxe | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Spec | ify: | 16. | \$ | 0.00 |
| | Illment or lease payments: Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | Car payments for Vehicle 2 | 17a. 17b. | · | |
| | , , | | · | 0.00 |
| | Other. Specify: | 17c. | | 0.00 |
| | Other. Specify: payments of alimony, maintenance, and support that you did not report as | 17d. | Φ | 0.00 |
| | icted from your pay on line 5, Schedule I, Your Income (Official Form 1061). | 18. | \$ | 0.00 |
| | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| Spec | ify: | 19. | | _ |
| | r real property expenses not included in lines 4 or 5 of this form or on Sched | | | |
| 20a. | Mortgages on other property | 20a. | \$ | 0.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| Othe | r: Specify: | 21. | +\$ | 0.00 |
| | · · · - | | <u> </u> | |
| | ulate your monthly expenses | | | |
| | Add lines 4 through 21. | | \$ | 2,640.09 |
| 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,640.09 |
| Calc | ulate your monthly net income. | | | |
| 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,022.17 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,640.09 |
| | | | | |
| 23c. | Subtract your monthly expenses from your monthly income. | | | 000.00 |
| | The result is your monthly net income. | 23c. | \$ | 382.08 |
| For e | ou expect an increase or decrease in your expenses within the year after you kample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage? | | | se or decrease because of a |
| _ \ \ | | | | |
| | Laplain Horo. | | | |

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| Fill in this inform | nation to identify your | ase: | | | |
|---------------------|------------------------------------------------------------------------------|---------------------------|-------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------|
| Debtor 1 | Cynthia A. Cliftor | 1 | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DIV | /ISION | |
| Case number | | | | 1 | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official Form | | | | | |
| Declarat | ion About a | n Individual | Debtor's Scho | edules | 12/15 |
| f two married ped | ople are filing together. | both are equally respons | ible for supplying correct in | formation | |
| | | | | | |
| butaining money | form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 | connection with a bankru | r amended schedules. Maki uptcy case can result in fines | ng a false stateme s up to \$250,000, o | nt, concealing property, or r imprisonment for up to 20 |
| Sign | Below | | | | |
| Did you pay | or agree to pay someo | ne who is NOT an attorne | y to help you fill out bankru | ptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. Na | ame of person | | | Attach Bankru | ptcy Petition Preparer's Notice, |
| | | | | Declaration, ai | nd Signature (Official Form 119) |
| Under penalt | y of perjury, I declare ti | nat I have read the summa | ary and schedules filed with | this declaration ar | nd |
| that they are | true and correct. | \cap (). | | | |
| × | Thia C. | Clyr | X | | |
| | A. Clifton e of Debtor 1 | | Signature of Debte | or 2 | |

Date ____

Date **April 17, 2017**

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| Fill | in this inform | ation to identify your | case: | | | |
|-----------------------|------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------|
| Deb | tor 1 | Cynthia A. Clifto | n e | | | |
| | | First Name | Middle Name | Last Name | | |
| | tor 2 use if, filing) | First Name | Middle Name | Last Name | | |
| | | | | | VICION | |
| Unit | ed States Bar | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DI | VISION | |
| Cas (if kn | e number own) | | | | - | Check if this is an amended filing |
| | ficial For | | Affairs for Individ | duals Filing for E | Bankruptcy | 4/1 |
| Be a nfor if kr | s complete ar mation. If mo nown). Answe | nd accurate as possik ore space is needed, or er every question. | ole. If two married people ar attach a separate sheet to tl | e filing together, both are e nis form. On the top of any | qually responsible for supply additional pages, write your | |
| Par | Give D | etails About Your Ma | rital Status and Where You | Lived Before | | |
| ١. | What is your | current marital statu | s? | | | |
| | ■ Married□ Not marr | ried | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than v | where you live now? | | |
| | ■ No □ Yes. List | all of the places you liv | red in the last 3 years. Do not | nclude where you live now. | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 there | lived Debtor 2 Prior Ad | ddress: | Dates Debtor 2 |
| | | | | | ty property state or territory? co, Texas, Washington and Wi | |
| | ■ No | | | | | |
| | ☐ Yes. Mal | ke sure you fill out <i>Sch</i> e | edule H: Your Codebtors (Offi | cial Form 106H). | | |
| Part | Explain | n the Sources of You | ncome | | | |
| | Fill in the total | I amount of income you | iployment or from operating u received from all jobs and a ave income that you receive to | II businesses, including part- | | dar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | last calendar nuary 1 to Dec | year: cember 31, 2016) | ■ Wages, commissions, bonuses, tips | \$4,536.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | | | - | | | |

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| Deb | | | | Debtor 1 | ebtor 1 | | Debtor 2 | | | | |
|------------------------------------|-------------------------|-----------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------|--------------|-------------------------------------------------------|--|--|--|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco Check all that ap | | Gross income (before deductions and exclusions) | | | |
| / lanuary 1 to December 31 2015) | | | | ■ Wages, commissions, bonuses, tips | \$16,287.00 | ☐ Wages, common bonuses, tips | nissions, | | | | |
| | | | | ☐ Operating a business | | Operating a b | usiness | | | | |
| (lanuary 1 to December 31, 2014) | | | 31, 2014) | ■ Wages, commissions, bonuses, tips | \$30,199.00 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | | ☐ Operating a business | | Operating a b | usiness | | | | |
| | the caler nuary 1 to | dar year: December | 31, 2013) | ■ Wages, commissions, bonuses, tips | \$32,098.00 | ☐ Wages, common bonuses, tips | nissions, | | | | |
| | | | | ☐ Operating a business | | ☐ Operating a b | usiness | | | | |
| | List each | , | he gross incor | ve income that you received tog | • | | | | | | |
| | | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inco Describe below. | me | Gross income (before deductions and exclusions) | | | |
| Par | rt 3: Lis | st Certain Pa | yments You | Made Before You Filed for B | ankruptcy | | | | | | |
| 6. | Are either No. | Neither De | ebtor 1 nor D | s debts primarily consumer of ebtor 2 has primarily consum personal, family, or household p | ner debts. Consumer debts | are defined in 11 U.S | S.C. § 101(8 |) as "incurred by an | | | |
| | | During the No. | Go to line 7 List below e | each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid tha | | | | | | | |
| | | * Subject | payments to | o not include payments for domestic support obligations, such as child support and alimony. Also, do not include to an attorney for this bankruptcy case. t on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | | |
| | ■ Yes | | | or both have primarily consumer debts. fore you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | | |
| | | ■ No. | Go to line 7 | | | | | | | | |
| | | □ _{Yes} | | each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include or domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for otcy case. | | | | | | | |
| | Credito | 's Name and | d Address | Dates of paymer | nt Total amount | Amount you still owe | Was this p | ayment for | | | |

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| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------|----------------------|-------------------------------------------------------|-------------------------------|--|--|--|--|--|--|
| | ■ No □ Yes. List all payments to an insider. | | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this | s payment | | | | | | |
| В. | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | | | | |
| | No | | | | | | | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this Include creditor | | | | | | | |
| Pai | rt 4: Identify Legal Actions, Repossession | ne and Foreclosures | | | | | | | | | | |
| | ☐ No ☐ Yes. Fill in the details. Case title Case number | Nature of the case | Court or agency | | Status of the case | | | | | | | |
| | Case title Case number Bank of America NA vs. Cindy Clifton 17CH62 | Nature of the case Foreclosure | Dekalb County Circuit Court 133 W State St Sycamore, IL 60178-1416 | | Status of the case ■ Pending □ On appeal □ Concluded | | | | | | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address | | rty repossessed, fo | reclosed, garnish | ed, attached, sei | zed, or levied? Value of the | | | | | | |
| | | Explain what happened | | | | property | | | | | | |
| Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | | | | | | |
| | Creditor Name and Address | Describe the action the creditor took | | | Date action was taken | | | | | | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a | | ty in the possessio | n of an assignee | for the benefit of | creditors, a | | | | | | |
| | ☐ Yes | | | | | | | | | | | |

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| Pa | rt 5: List Certain Gifts and Contributions | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift. | | | | | | |
| | Gifts with a total value of more than \$600 person | per | Describe the gifts | Dates you gave the gifts | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |
| 14. | ■ No | | | | | | |
| | Yes. Fill in the details for each gift or conti | tributio | n. | | | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name | al | Describe what you contributed | Dates you contributed | Value | | |
| | Address (Number, Street, City, State and ZIP Code) | | | | | | |
| Pa | rt 6: List Certain Losses | | | | | | |
| 15. | Within 1 year before you filed for bankruptor gambling? ■ No □ Yes. Fill in the details. | cy or | since you filed for bankruptcy, did you lose anyt | hing because of theft, | fire, other disaster, | | |
| | how the loss occurred | nclude | be any insurance coverage for the loss the amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | |
| | | | Ĺ | | | | |
| Pa | rt 7: List Certain Payments or Transfers | | | | | | |
| 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone your consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | y to anyone you | | | | |
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | u | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | |
| | Brian Wright & Associates, P.C. 437 West State Street Suite 101 Sycamore, IL 60178 | | Legal Services for Bankruptcy Filing | 3/30/17 | \$1,000.00 | | |
| | MoneySharp Credit Counseling | | \$10.00 Credit Counseling Class | 4/2/2017 | \$10.00 | | |
| | website | | Ground Gourisoning Graces | | | | |
| 17. | Within 1 year before you filed for bankruptor promised to help you deal with your creditor Do not include any payment or transfer that you No Yes. Fill in the details. | ors or | | r transfer any propert | y to anyone who | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

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| | transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ■ No ■ Yes. Fill in the details. | | | operty). Do not include | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------|----------------------------------------------------------------------------|-----------------------------------------|--|
| | Person Who Received Transfer Address | Description and v property transfer | | Describe any property or payments received or debts paid in exchange | Date transfer was made | |
| | Person's relationship to you | | | | | |
| 19. | Nithin 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a peneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | |
| | Name of trust | Description and v | alue of the prope | erty transferred | Date Transfer was | |
| | | | | | made | |
| Pai | t 8: List of Certain Financial Accounts, Ins | struments, Safe Deposit | Boxes, and Stora | age Units | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association No | r other financial accoun | ts; certificates of | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accourant instrument | nt or Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| 21. | cash, or other valuables? | ear before you filed for | bankruptcy, any | safe deposit box or other deposit | ory for securities, | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S and ZIP Code) | | Describe the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, Sand ZIP Code) | | Describe the contents | Do you still have it? | |
| Pai | t 9: Identify Property You Hold or Control | for Someone Else | | | | |
| 23. | Do you hold or control any property that so someone. | | de any property | you borrowed from, are storing fo | or, or hold in trust for | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, Code) | | Describe the property | Value | |
| Pai | t 10: Give Details About Environmental Info | ormation | | | | |
| | | | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations Case 17-80932 Doc 1 Filed 04/19/17 Entered 04/19/17 10:44:52 Desc Main Page 39 of 51 Case number (if known) Document

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controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous

| | material, pollutant, contaminant, or similar term. | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------|--|--|
| Report all notices, releases, and proceedings that you know about, regardless of when they occurred. | | | | | | |
| 24. | Has any governmental unit notified you that yo | s any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 25. | Have you notified any governmental unit of any | ave you notified any governmental unit of any release of hazardous material? | | | | |
| | No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or admini | istrative proceeding under any enviro | onmental law? Include settlements and | l orders. | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case Title | Court or agency | Nature of the case | Status of the | | |
| | Case Number | Name Address (Number, Street, City, State and ZIP Code) | | case | | |
| Par | t 11: Give Details About Your Business or Cor | nnections to Any Business | | | | |
| | | • | | | | |
| 27. | | hin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | |
| | ☐ An officer, director, or managing execu | tive of a corporation | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | |
| | ☐ Yes. Check all that apply above and fill in the details below for each business. | | | | | |
| | Business Name D | Describe the nature of the business | Employer Identification number | | | |
| | Address (Number, Street, City, State and ZIP Code) | lame of accountant or bookkeeper | Do not include Social Security no | umber or ITIN. | | |
| Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include a institutions, creditors, or other parties. | | | all financial | | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details below. | | | | | |
| Name Address (Number, Street, City, State and ZIP Code) | | | | | | |
| Par | Part 12: Sign Below | | | | | |
| (31) | Jigii Delow | | | | | |

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a Case 17-80932 Doc 1 Filed 04/19/17 Entered 04/19/17 10:44:52 Desc Main Document Page 40 of 51 Case number (if known)

bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Cynthia A. Clifton
Signature of Debtor 2

Signature of Debtor 2

Date April 19, 2017

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
Yes

Pid you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Debtor 1 Clifton, Cynthia A. | Case number (if known) |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| bankruptcy case can result in fines up to \$250,000, or imp 16 U.S.C. §§ 152, 1341, 1519, and 3571. Cynthia A. Clifton Signature of Debtor 1 | risonment for up to 20 years, or both. Signature of Debtor 2 |
| Date April 17, 2017 | Date |
| Did you attach additional pages to <i>Your Statement of Fina</i> ■ No □ Yes | ncial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay someone who is not an attorn ■ No | ey to help you fill out bankruptcy forms? |
| ☐ Yes. Name of Person . Attach the Bankruptcy Petition | on Prenarer's Notice Declaration, and Signature (Official Form 110) |

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United States Bankruptcy Court Northern District of Illinois, Western Division

| IN RE: | | Case No. |
|----------------------------------|------------------------------------------------------|-----------------------------------------|
| Clifton, Cynthia A. | | Chapter 13 |
| | Debtor(s) | |
| | VERIFICATION OF CREDITOR MATE | RIX |
| | | Number of Creditors20 |
| The above-named Debtor(s) hereby | verifies that the list of creditors is true and corr | rect to the best of my (our) knowledge. |
| Date: April 17, 2017 | Cindy Cly | |
| | Debtor | |
| | Joint Debtor | |

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex PO Box 297871 Fort Lauderdale, FL 33329-7871

Anselmo, Lindberg, Oliver, LLC 1771 W Diehl Rd Ste 120 Naperville, IL 60563-4917

Bankamerica 4909 Savarese Cir Tampa, FL 33634-2413

Chase Card PO Box 15298 Wilmington, DE 19850-5298

Chase Card Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850-5298

Comenity Bank/Carsons PO Box 182125 Columbus, OH 43218-2125 Comenity Bank/Carsons 3100 Easton Square Pl Columbus, OH 43219-6232

Credit First N A 6275 Eastland Rd Brook Park, OH 44142-1301

Credit First National Assoc Attn: BK Credit Operations PO Box 81315 Cleveland, OH 44181-0315

Fed Loan Serv PO Box 60610 Harrisburg, PA 17106-0610

Fed Loan Sevicing PO Box 69184 Harrisburg, PA 17106-9184

Navy Federal Cr Union PO Box 3000 Merrifield, VA 22119-3000

Navy Federal Cr Union PO Box 3700 Merrifield, VA 22119-3700 Real Time Resolutions Attn: Bankruptcy PO Box 36655 Dallas, TX 75235-1655

Syncb/Care Credit 950 Forrer Blvd Kettering, OH 45420-1469

Syncb/lowes PO Box 956005 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Lowes Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Target C/O Financial & Retail Srvs Mailstopn BT PO Box 9475 Minneapolis, MN 55440-9475 Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Desc Main

B201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Western Division

| IN RE: | Case No | |
|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Clifton, Cynthia A. | Chapter 13 | |
| Debtor(s) | • | |
| | E TO CONSUMER DEBTOR(S) E BANKRUPTCY CODE | |
| Certificate of [Non-Attorney] | Bankruptcy Petition Preparer | |
| I, the [non-attorney] bankruptcy petition preparer signing the debto notice, as required by § 342(b) of the Bankruptcy Code. | r's petition, hereby certify that I delivered to the debtor the attached | |
| Printed Name and title, if any, of Bankruptcy Petition Preparer Address: | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of | |
| the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) | | |
| Signature of Bankruptcy Petition Preparer of officer, principal, resp partner whose Social Security number is provided above. | oonsible person, or | |
| Certificate of | of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received and read the | attached notice, as required by § 342(b) of the Bankruptcy Code. | |
| Clifton, Cynthia A. Printed Name(s) of Debtor(s) | X Signature of Debter Date | |
| Case No. (if known) | X Signature of Joint Debtor (if any) Date | |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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